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 Urgent For Review Please Comment Please Reply Please Recycle*Application # 09/361,619*

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM		Application Number 09/381,619	RECEIVED CENTRAL FAX CENTER
(to be used for all correspondence after initial filing)		Filing Date 07/27/04	DEC 06 2004
Total Number of Pages in This Submission		First Named Inventor Michel H. Klein	
		Art Unit	
		Examiner Name	
		Attorney Docket Number API-1038-30-US-NP	

ENCLOSURES (Check all that apply)			
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Robert Yoshida
Signature	
Printed name	Robert Yoshida
Date	Reg. No. 54, 941

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Typed or printed name	Wendy Edwards
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PTO/SB/61 (11-04)

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**POWER OF ATTORNEY
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INDICATION FORM**

Application Number	09/581,619
Filing Date	07/27/1999
First Named Inventor	Michel H. Klein
Title	Protective Recombinant Haemophilus
Art Unit	
Examiner Name	
Attorney Docket Number	API-1036-30-US-NP

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number: [Redacted]

OR

Practitioner(s) named below:

Name	Registration Number
Robert Yoshida	54,941
Thomas Bordner	47,436
Patrick J. Halloran	41,053
G. Kenneth Smith	43,135

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number: [Redacted]

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State: [Redacted]

Zip: [Redacted]

Country: [Redacted]

Telephone: [Redacted]

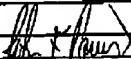
Fax: [Redacted]

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature:  Date: 13 Dec 2004
Name: John E. Parish Telephone: 570-639-4509
Title and Company: V.P. of Intellectual Property

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

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PTO/SB/62 (09-04)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/381,619
Filing Date	07/27/1999
First Named Inventor	Michel H. Klein
Art Unit	
Examiner Name	
Attorney Docket Number	API-1036-30-US-NP

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

Please change the correspondence address for the above-identified application to:

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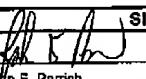
OR

<input type="checkbox"/> Firm or Individual Name	Aventis Pasteur				
Address	1 Discovery Drive Bldg. 1-Knerr Bldg.				
City	Swiftwater	State	PA	Zip	18370
Country	United States				
Telephone	570-895-2528	Fax	570-895-2702		

I am the:

- Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature					
Name	John E. Parish				
Date	1 Dec 2004	Telephone	570-839-4509		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/98/08 (09-04)

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Aventis Pasteur LimitedApplication No./Patent No.: 09/381,819Filed/Issue Date: 07/27/1999

Entitled: Protective Recombinant Haemophilus Influenzae High Molecular Weight Proteins

Aventis Pasteur Limited

(Name of Assignee)

a Corporation

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. the assignee of the entire right, title, and interest;2. an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

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OR

B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
 The document was recorded in the United States Patent and Trademark Office at
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 Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

<u>John E. Parish</u>	Signature	<u>3/26/2008</u>	Date
Printed or Typed Name		<u>570-895-4509</u>	
V.P. of Intellectual Property		Telephone Number	

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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